

Governor's Interagency Council on Health Disparities

Health Impact Review Procedures–DRAFT State Board of Health ~ December 13, 2006

Background and Purpose

On March 27, 2006, Governor Christine Gregoire signed Second Substitute Senate Bill 6197, which created the Governor's Interagency Coordinating Council on Health Disparities and authorized the State Board of Health to conduct health impact reviews (HIRs) in collaboration with the Council. This document discusses the definition, goal, and scope of HIRs and outlines processes for requesting and conducting a HIR.

Definition

A HIR is a review of a legislative or budgetary proposal that analyzes the extent to which the proposal is likely to have a positive or negative impact on health disparities.

Goal

The goal of a HIR is to provide objective information policy makers can use when deciding whether to proceed with a proposal, or to make changes to mitigate the harms and maximize the benefits of that proposal, if the proposal is likely to impact health disparities.

Scope

A HIR is not intended to be a comprehensive analysis of all the potential health-related impacts of the policy or budgetary proposal under review. Rather, the focus of a HIR is to determine whether the proposal is likely to exacerbate or ameliorate health disparities, as well as to impact the social determinants of health. Due to limited time and resources, the HIR relies on existing data, the published scientific literature, and professional judgment. It may also consider informed predictions from representatives of populations and communities that expect to be affected.

Board, Council, and Agency Roles and Responsibilities

The State Board of Health is responsible for approving HIR request forms and procedures, for completing HIRs, and for making final HIR reports publicly available on the Board's Web site. In addition, the Board has authority to limit the number of HIRs it completes.

The Council shall serve in an advisory capacity to the Board. Specifically, the Council is responsible for reviewing HIR forms and procedures proposed for the Board's approval and for collaborating with the Board during the completion of HIRs. Such collaboration may include, but is not limited to consultation when considering whether the Board will refuse a request for a HIR and providing input and review at various stages during the HIR assessment process. Council members will be notified when HIR requests are received.

State agencies are responsible for providing assistance to the Board upon request. The Board may ask for state agency collaboration in identifying subject matter experts, advising the Board on the potential impacts of a policy or budget proposal, assisting with the identification of appropriate literature, providing available data or information, and reviewing draft HIR reports. Agencies will be asked to appoint a primary point of contact for HIR-related requests. Agency representatives appointed to the Council will serve as points of contact for HIRs in the event that a point of contact is not assigned. Agencies have the authority to decline a request for assistance due to inadequate resources.

Requesting a Health Impact Review

Only the Governor or a state legislator may request a HIR. A HIR can be requested of a proposal or a portion of a proposal for a state legislative or budgetary change. This includes:

- Bills that have been introduced.
- Bills available in draft form from the Office of the Code Reviser.
- Bills that have passed the Legislature and are awaiting the Governor's signature.
- Budgets, including associated decision packages, submitted to the Legislature by a statewide elected official.
- Budgets bills, including associated decision packages and provisos, proposed by the Senate Ways and Means and House Appropriations committees.
- Reports, findings, recommendations and other types of budget and policy proposals that are required by law, have been formally adopted and transmitted to the Governor or the Legislature, and have been issued by a board, commission, panel, joint select committee or other body established in statute.
- Agency decision packages submitted to the Office of Financial Management, provided that the Governor requests the HIR.

Budgetary and legislative policies are no longer considered proposals once they have become law, and are not candidates for HIRs. If time and resources allow, the Board may, at its own discretion, agree to review working drafts of legislation that have not been submitted to the Office of the Code Reviser.

A HIR request form will be available for downloading and printing from the State Board of Health's Web site at www.sboh.wa.gov. The Legislature and the Governor's Office may choose to make the form available on their Internet or intranet sites. Completed forms can be sent electronically to hir@doh.wa.gov, faxed to (360) 236-4088 or mailed to PO Box 47990, Olympia, WA 98504-7990. The Board will acknowledge receipt of a completed form within one business day and will post requests received on its Web site.

At a minimum, the following information must be submitted to initiate a request for a HIR:

- Date of the request
- Requester's name
- Legislative staff contact name and contact information
- Subject of the HIR (e.g., bill, decision package)
- Scope of the HIR (entire or portion of the policy or budgetary change)
- Completion date

When conducting a HIR, the Board will consider various ways that the proposal might result in changes to social determinants of health and positively or negatively impact health disparities. Nonetheless, in an effort to help the Board better understand the reasons why the review is being requested, the HIR form also collects the following voluntary information:

- Description of how the requester thinks the proposal might impact health disparities
- Checklist of conditions the proposal might impact

- Checklist of social determinants of health the proposal might impact
- Specific populations that are likely to be impacted by the proposal
- Specific organizations or community groups that the requester recommends the Board contact when conducting its review

Prioritization

If resource constraints require the Board to prioritize requests, the following guidelines will apply:

- Issues that take the form of legislation, even in draft form, should have priority over recommendations from boards, commissions, select committees and other bodies convened to issue reports and recommend policy.
- Proposals that have been introduced in the Legislature should have priority over draft legislation and budget proposals that are not in the form of a bill.
- Legislation scheduled for a hearing shall be given priority over legislation not yet on a committee calendar.

Right to Refuse a Request

The Board may decline a HIR request if, in the judgment of the executive director of the Board, after consultation with the Board and Council chairs, staff time and resources are not adequate to complete a quality review in the time allotted. It may also decline a HIR request if conducting a quality review requires another agency to provide data or otherwise participate significantly in the process, and that agency declines to participate because of resource constraints.

Timeframe

HIRs requested during session for proposals that are, or are likely to be, under consideration by the Legislature during the session must, by statute be delivered completed within 10 days. The Board interprets this to mean 10 days from receipt of the request by the Board. For HIRs requested during the interim, or requests received during session to evaluate proposals not under consideration during the current session, the Board will make every effort to respond within 60 days. Requesters may ask for a shorter turnaround but should be prepared for explaining the need for a shorter turnaround time (for example, needing a HIR completed in time for a committee hearing). These requests will be honored at the discretion of the Board's Executive Director after consulting with other affected agencies.

Conducting a Health Impact Review

Upon receipt, HIR requests will be assigned to a policy analyst at the State Board of Health. The Board recognizes that because the subject matter of HIR requests will vary broadly, as will the available time and resources, the process for assessing the impacts on health disparities and the depth of analysis must be flexible. Nonetheless, a general process for conducting a HIR has been developed and is outlined below.

Step 1: Describe the proposed policy or budgetary change

Provide a detailed description of the proposed policy or budgetary change and any direct results the proposal intends to create. This description should provide as much information as possible about the intervention, its target audience, who is delivering the intervention, and where and how the intervention is being implemented. In addition, all intended, direct consequences of the intervention should be listed and explained.

Step 2: Identify and consult with subject matter experts, interested Council and Board members, and representatives of potentially affected communities and populations

Consult with relevant stakeholders, representatives of communities and population groups that are likely to be affected, and subject matter experts regarding the proposed intervention and potential impacts on both the determinants of health as well as specific health outcomes. Subject matter experts may be able to provide existing data or information, and can assist and inform the development of the conceptual model and /or the literature search (see steps 3, 4, and 5).

Step 3: Conduct initial literature review

Conduct an initial, high-level literature review specific to the policy or intervention to provide additional guidance for the development of a conceptual model (see step 4). As much as possible, draw on the knowledge of subject matter experts.

Step 4: Develop a conceptual model

Develop a conceptual model, which depicts the potential, causal pathways linking the intervention to its ultimate impact on health disparities. The conceptual model provides a visual illustration and will be useful in guiding the analysis.

Step 5: Conduct targeted literature searches

Conduct a literature search for each of the pathways illustrated in the conceptual model. The literature searches will rely on available databases of the scientific peer-reviewed literature (e.g., Medline), Internet resources (e.g., Google Scholar), article reference lists, and other relevant material identified by subject matter experts. To the extent possible and when available, the literature search will focus on studies conducted with Washington State populations.

Step 6: Evaluate the evidence

Evaluate the evidence to determine the direction and strength of each of the causal pathways in the conceptual model. Due to time and resource limitations, as well as likely limitations in the availability of data or evidence-based interventions reported in the literature, this assessment will most likely be qualitative in nature. In instances when data are available, a quantitative assessment of the magnitude of the impact on health disparities may be conducted.

Step 7: Summarize the evidence

Summarize the body of evidence and draw conclusions regarding the likelihood that the proposed policy or budgetary change will positively or negatively impact health disparities. The conceptual model will be useful for illustrating where strong or weak evidence exists to support a

causal pathway, and ultimately why a proposal may or may not have an impact on health disparities.

Step 8: Obtain input on the draft Health Impact Review

Solicit feedback from staff, members of the Board and Council, any agencies that contributed data to the analysis, and the executive director. To the extent time allows, the draft may also be reviewed externally by subject matter experts and other relevant stakeholders. External reviewers may include the requester or his or her staff.

Step 9: Finalize and disseminate the Health Impact Review

Obtain final review and approval from the Board Chair or his or her designee. Once finalized, the HIR will be posted to the State Board of Health's Web site. A notification that the HIR has been completed with a link to the Web address where the final document can be found will be sent to the requester, subject matter experts and other relevant stakeholders.

Step 10: Evaluate the Health Impact Review

The final step is to track the impact that the HIR has on the decision making process. The purpose of this step is to determine whether or not proposals are moved forward unchanged, modified, or abandoned following the HIR.